Appln No. 10/583,243

Amdt date March 27, 2009

Reply to Office action of February 9, 2009

Amendments to the Specification:

Please amend the paragraphs beginning on page 2, starting at line 13 and continuing to

page 3 ending at line 13 with the following paragraphs:

According thereto, the folding mechanism with which the cushion carrier can be folded into an

upright position comprises a pair of levers, the two levers of which are connected to each other in

an articulated manner at a knee joint, the two levers of the pair of levers first of all enclosing an

acute angle at each knee joint in a use position of the cushion carrier, which acute angle, when

the cushion carrier is folded over from the use position into the essentially upright position in

front of the backrest, is transformed into an obtusea reflex angle.

By going beyond the (neutral) angular position of 180°, i.e. by the transforming of an initially acute angle (bounded by the two levers of the pair of levers) into an obtasea reflex angle, the pair

of levers takes up a new stable position which cannot readily be moved back again by the

weights acting on the cushion carrier into the previous state in which the two levers enclose an

acute angle and the cushion carrier was in its (essentially horizontal) use position.

In this case, means are preferably provided which limit the maximum achievable (obtusereflex)

angle between the two levers of the pair of levers by, when an obtusea reflex angle with a

defined value of greater than 180° is achieved, a further increase of this angle being prevented.

For example, a stop is suitable for this, the stop limiting the possible movement of at least one

lever of the pair of levers during the folding over of the cushion carrier into an upright position.

The pair of levers is preferably designed as a pair of articulated levers, the one lever of which is

coupled pivotably to the cushion carrier and the other lever of which can be coupled pivotably to

a floor subassembly of the corresponding motor vehicle. In this case, the coupling points of the

two levers and the knee joint thereof are arranged in such a manner with respect to the pivot axis

of the cushion carrier (about which the cushion carrier can be folded) that, when the angle of

-2-

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180° is exceeded during the folding upward of the cushion carrier, a folding back of the cushion carrier under the action of the weights acting on the cushion carrier is not possible. On the contrary, weights which act on the folded upward cushion carrier have the tendency to further enlarge the obtuse-reflex angle between the two levers of the pair of levers and, as a result, to release a clamping of the arrangement.

Please amend the paragraph on page 4, starting at line 33 and continuing to line 38 with the following paragraph:

Use is made here of the fact that, when the cushion carrier is folded upward into an upright position, an initially acute angle bounded by the two levers is transformed into an obtusea reflex angle. This permits such an arrangement and design of the elastic means that the latter prevent a resetting movement of the two levers from the obtuse reflex angle to an acute angle.

Please amend the paragraph on page 6, starting at line 9 and continuing to line 22 with the following paragraph:

As an alternative or in addition to the transforming of an initially acute angle between the two levers of the front pair of levers into an obtusea reflex angle, it can be provided to guide the knee joint of the front pair of levers in a guide device which has a point of discontinuity (for example in the form of a bend) over which the joint moves directly before reaching the sought-for folded upward (upright) position of the cushion carrier. For this purpose, the guide device can can be configured as a guide slot in accordance with the keyhole principle or can interact with the joint guided therein in the manner of in the manner of a bayonet catch, so that, in the folded upward state of the cushion carrier, the joint is received in a region of the slotted guide mechanism on the far side of the point of discontinuity and is held in a stable position. The pair of levers is therefore stabilized in a defined position and the cushion carrier is held in an upright, folded upward position.

-3-

Please amend the paragraphs beginning on page 8, starting at line 35 and continuing to page 9 ending at line 20 with the following paragraphs:

Figure 2 shows the vehicle seat from figure 1 after the "cinema chair function" has been carried out, i.e. after the cushion carrier T together with the seat cushion S have been folded upward in front of the backrest R and its backrest cushion L. This is made possible by a pivoting of the cushion carrier T about the pivot axis 20 at the upper end of the rear pivot lever 2, with the pair of articulated levers 1 being moved in such a manner that the two pivot levers 11, 12 of the pair of articulated levers 1, which enclose an acute angle α in the state of use of the vehicle seat shown in figure 1, now form an obtusea reflex angle β of somewhat more than 180°.

As a result of the cushion carrier T being folded upward, the knee joint 10 and the two further joints 13, 14 of the front pair of articulated levers 1 take up such a position with respect to each other that forces which act on the cushion carrier T and which have the tendency to fold the latter forward again about its pivot axis 20 in the direction of its use position, would lead to an enlargement of the obtuse-reflex angle β between its two pivot levers 11, 12. However, this is not possible, since the secondary pivot lever 12 of the front pair of articulated levers 1 is limited in its movement by the bearing bracket 25, which acts as a stop, for the lower end of the rear pivot lever 2. This makes it impossible for the two pivot levers 11, 12 of the front pair of articulated levers 1 to buckle further so as to further enlarge the obtuse-reflex angle β . In this case, according to one embodiment, the cushion carrier T can be supported on a stop 11a provided on the primary pivot lever 11 of the pair of articulated levers.

Please amend the paragraph on page 10, starting at line 1 and continuing to line 7 with the following paragraph:

Furthermore, the spring element 4, which is designed as a linear spring and acts on the secondary pivot lever 12 of the front pair of articulated levers 1, now acts on said pivot lever in such a manner that it has the tendency to maintain an obtusea reflex angle 8 between the two pivot

levers 11, 12 of the front pair of articulated levers 1 by it pulling the secondary pivot lever 12 against the bearing bracket 25 acting as a stop.

Please amend the paragraphs on page 10, starting at line 16 and continuing to line 38 with the following paragraphs:

Furthermore, instead of a spring element 4 in the form of a linear spring, a torsion spring may also be used in order to stabilize the two pivot levers 11, 12 of the front pair of articulated levers 1 in the position in which they form an obtusea reflex angle β and in which the cushion carrier T extends essentially upright along the backrest R. A torsion spring [[5]]Z which is suitable for this and is indicated by dashed lines in figure 2 is arranged on the knee joint 10 of the front pair of articulated levers 1 and is supported by its two legs 51, 52 on the two pivot levers 11, 12 of the front pair of articulated levers 1 in such a manner that said pivot levers are stabilized in their position forming an obtusea reflex angle β .

The preceding observations and explanations were always based on an acute angle α which is enclosed by the two pivot levers 11, 12 of the front pair of articulated levers 1 when the cushion carrier T is in its use position, and which is transformed into an obsusea reflex angle β when the cushion carrier T is folded into an essentially upright position in front of the backrest R, with the obsuse-reflex angle β being just a few degrees above the limit angle of 180°. Of course, the observation may also take as a starting point the obsuse-reflex angle which is adjacent to the acute angle α and which is initially enclosed by the two pivot levers 11, 12 of the front pair of articulated levers 1 and which is transformed, when the cushion carrier T is folded upward into an essentially upright position, into an acute angle (adjacent to the obsuse-reflex angle β) which is somewhat less than 180°.

Please amend the paragraphs on page 11, starting at line 1 and continuing to line 26 with the following paragraphs:

The crucial point is that an acute or obtuse-reflex angle (depending on the approach), which is initially enclosed by the two pivot levers 11, 12 of the front pair of articulated levers 1 is transformed, when the seat cushion T is folded upward, into an obtusea reflex or acute angle, i.e. an initially acute angle into an obtusea reflex angle and an initially obtuse-reflex angle into an acute angle. The effect which can be achieved by this is that, owing to the arrangement of the individual joints 10, 13, 14 of the front pair of articulated levers 1 and of the pivot axis 20 of the cushion carrier T, the arrangement overall is fixed or clamped in such a manner that the cushion carrier T is held in its upright position.

As an alternative or in addition to the transforming of an initially acute angle α between two pivot levers 11, 12 of the front pair of articulated levers 1 into an obtusea reflex angle β , provision may be made to guide the knee joint 10 of the front pair of articulated levers 1 in a slotted guide mechanism which has a point of discontinuity (for example by bending) immediately before the sought-for, folded upward (upright) position of the cushion carrier T is reached, and can be configured in accordance with the keyhole principle or interacts with the joint guided therein in the manner in the manner of a bayonet catch, so that, in the folded upward state of the cushion carrier, the joint 10 is received in a region of the slotted guide mechanism on the far side of the point of discontinuity. The pair of articulated levers 1 is therefore stabilized in a certain position and the cushion carrier T is held in an upright, folded upward position. This will be explained in more detail further below with reference to figures 4 and 5.

Please amend the paragraph on page 13, starting at line 10 and continuing to line 21 with the following paragraph:

By the guide element 10' striking against the second stop 52 of the guide slot 5, the folding of the cushion carrier T upward, which - as in the exemplary embodiment illustrated with reference to

figures 1 and 2 - corresponds to a pivoting movement about a pivot axis 20' defined by the rear pivot lever 2, is ended. In the present case, in order to form the pivot axis, the rear pivot lever 2 is connected in an articulated manner to the cushion carrier T via an extension 21 arranged rigidly on the cushion carrier 1 (more precisely on a seat side part). As also in the case of the exemplary embodiment illustrated with reference to figures 1 and 2, an acute angle α , which was originally enclosed by the two pivot levers 11, 12 of the front pair of articulated levers 1, is transformed into an obtusea reflex angle 8.